Please type a plus sign (+) inside this box ⟶ [+]

# CHANGE OF CORRESPONDENCE ADDRESS
## *Application*

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

| | |
|---|---|
| Application Number | 10/021,735 |
| Filing Date | November 5, 2001 |
| First Named Inventor | Joanne Paquin, et al. |
| Group Art Unit | 1614 |
| Examiner Name | Raymond J. Henley, III |
| Attorney Docket Number | PC 32131 |

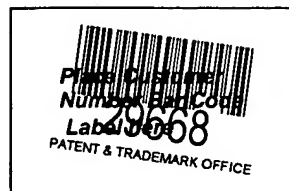Please change the Correspondence Address for the above-identified application to:

☐ Customer Number    [ 29668 ] ⟶

*Type Customer Number here*

**OR**

| ☒ Firm *or* Individual Name | Warner-Lambert Company, LLC | | | | |
|---|---|---|---|---|---|
| Address | 201 Tabor Road | | | | |
| Address | | | | | |
| City | Morris Plains | State | NJ | ZIP | 07950 |
| Country | USA | | | | |
| Telephone | 973 385 7072 | Fax | | 973 385 3117 | |

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or Agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

| Typed or Printed Name | Barry H. Jacobsen, Reg. No. 43,689 |
|---|---|
| Signature | *[signature]* Barry H. Jacobsen |
| Date | May 18, 2004 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of _____1_____ forms are submitted.